Box ISSUE FEE bis fees, to: **Assistant Commissioner for Patent**



Complete and mail this form, together with ap

Washington, D.C. 20231

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 1
through 4 should be completed where appropriate. All further correspondence including the Issue Fee
Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current
correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a)
specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for
maintenance fee notifications.
CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

Certificate of Mailing

I hereby certify that this Issue Fee Transmittal is being deposited with

	020457 ANTONELLI SUITE 180	TERRY STOUT	TM02	919E	mail in an envelope addre the date indicated below.	essed to the Box Issue	r postage for first class Fee address above on
		H SEVENTEENTH	4 STRE	K 1 4 2001			(Depositor's name)
	ARLINGTON	VA 22209	E.		/		(Signature)
		T		OTHER CON	<u> </u>		(Date)
AP	PLICATION NO.	FILING DATE	TOTAL CLAIMS	1	EXAMINER AND GROUP	ART UNIT	DATE MAILED
ļ	om energia	0 00/40/00	004	. DU (AN)	5		
First Name	<u>09/265,36</u> ;	3 03/10/ 99	004	PHAN.	_Ft		12/14/00
Applicant	ARAI,		35	USC 154	(b) term ext.	<u> </u>	a ys.
INVENTION		PARATUS ENABL OMPUTER USING				TY WITH A	N.
ATT	YS DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
Use of PTO form(s) and Customer Number are recommended, but not required. (1) the name attorneys of the name of PTO/SB/122) attached. (2) The name of Correspondence Address form PTO/SB/122) attached.					Antonelli, Terry, r agents OR, alternatively, (2) of a single firm (having as a registered attorney or agent) nes of up to 2 registered patent r agents. If no name is listed, no e printed. Antonelli, Terry, Stout & Kraus, LLP 2		
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropiate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE Hitachi, Ltd. (B) RESIDENCE: (CITY & STATE OR COUNTRY) TOKYO, Japan					AU issue ree Advance Order - # of Copies 4b. The following fees or deficiency in these fees should be charged to:		
Please check the appropriate assignee category indicated below (will not be printed on the patent) individual **Disporporation or other private group entity : government					DEPOSIT ACCOUNT NUMBER 01-2135 (ENCLOSE AN EXTRA COPY OF THIS FORM) X Issue Fee Advance Order - # of Copies		
The COMM	ISSIONER OF PATENTS	AND TRADEMARKS IS requ	ested to apply the Iss	ue Fee to the app			8
(Authorized		Kraus , 224	(Date)				5363
	the assignee or other part	pted from anyone other than y in interest as shown by the	* 1	0000163 09265363			
depending	on the needs of the indi-	n is estimated to take 0.2 h	s on the amount of t	ime required			000016

TRANSMIT THIS FORM WITH FEE

of information unless it displays a valid OMB control number.

Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231 Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection